



Virginia Board of Accountancy
VERIFICATION OF REGULANT STATUS/LETTER OF GOOD STANDING

- F Has the Virginia Board of Accountancy determined that your state meets the substantial equivalent provisions of the *Virginia Board of Accountancy Regulations*?

No ☐ Yes ☐ If yes, you do not have to complete questions #8 and #9.

A current list of those states deemed "substantially equivalent" is available online at www.boa.virginia.gov or from the Board office at (804) 367-8505.

THIS IS TO CERTIFY THAT A GOOD FAITH SEARCH OF THE RECORDS OF THE _____ State

BOARD OF ACCOUNTANCY REVEALS THE FOLLOWING IN REFERENCE TO:

1. Applicant's Name _____
First Middle Last Generation (SR, JR, etc.)
2. Social Security Number * - -
3. A. Date applicant was issued a CPA certificate to practice public accountancy in your state _____
B. Does this certificate authorize the applicant to practice public accountancy which is defined in Virginia as the giving of an assurance, in a report or otherwise, whether expressly or implicitly, unless this assurance is given by an employee to his employer?
Yes ☐ No ☐ If no, please provide details. _____
4. Applicant's license/certificate number _____
5. Is the applicant currently in good standing in your state?
Yes ☐ No ☐ If no, please provide details. _____
6. Has the applicant been found guilty of violating your state's standards of conduct or practice?
Yes ☐ No ☐ If yes, please provide details. _____
7. Does the applicant have any pending action alleging violations of your state's standards of conduct or practice?
Yes ☐ No ☐ If yes, please provide details. _____
8. Did the applicant meet the education requirements in effect in your state when the applicant passed the CPA exam?
Yes ☐ No ☐ If no, please provide details. _____
9. Does the applicant meet the experience requirement currently in effect in Virginia? Currently, the Virginia Board of Accountancy requires at least one year of acceptable experience in accounting or a related field. The experience may include providing any type of service or advice involving the use of accounting, management, financial, tax, or consulting advisory skills or services. Acceptable experience shall include employment in government, industry, academia, or public accounting or related services. One year of experience shall consist of full or part-time employment that extends over a period of no less than a year and no more than three years and includes no fewer than 2,000 hours of performance of the aforementioned services.
Yes ☐ No ☐
10. Are there any closed disciplinary actions against the applicant.
Yes ☐ No ☐ If yes, please provide details. _____
11. Name _____ Date _____
Title _____
Signature _____

Official Seal
This is an official verification only if it contains a raised seal and an original signature.